Town of Eureka

PO Box 313 - Eureka, MT 59917 - (406) 297-2123

SIGN PERMIT APPLICATION

SEE ORDINANCE #291 -- RESOLUTION #2007-618

Name of Business:			
Mailing Address:			
B1	,		
Eureka Business License #:	Tax ID (EIN) #:		
Name of Applicant:			
Mailing Address:			
Phone/Cell:	7		
Location of Sign:	7.		
Consent of Owner(s) of Building/Prope	rty where sign is to be located:		
(Print)	(Sign)	-	
		awing of proposed signage including	
# of Faces & Sizes (Each Face SQFT):	50 10 400 555	Total SQFT:	
Height above Grade: Lowest Point _			
Street Frontage (Feet):			
Comments:			
SUBMITTED HEREIN & ALL OTHER FORMS APPLICATION, TO BE TRUE, COMPLETE & A REPRESENTATION SUBMITTED IN CONNECT	ACCURATE TO THE BEST OF MY KNOWLI	MATION SUBMITTED AS PART OF THIS EDGE. SHOULD ANY INFORMATION OR RECT OR UNTRUE, I UNDERSTAND THAT	
Signed:	Title:	Date:	
Eureka Town Council Approval Date:			
Applicant Notified:	Amount Due:		
Receipt #: Date Paid	· Check #	Cash	